R

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DA	TE OF REPORT	2.a. NAMEOFC	ANDIDATE OF	COMMITTEE		
2.b. IF	COMMITTEE, NAME OF CANDIDATE				3. ELECTION DATE 3-3-09	
Str.	MPAIGN ADDRESS AND PHONE eet or Rural Route AVE.	city Chattan	wgr.	State	Zip Code 37409	Phone 821-0804
	NDIDATE'S HOME ADDRESS (if different eet or Rural Route III W. 52nd St.	than 4.a.) City Chattan		State	Zip Code 37409	Phone 821-5228
C	FICE SOUGHT (include district number, if	applicable)		SON N	TREASURER (may be a Cholle Da	candidate)
QL	TEGO'RY OR REPORT (Check one)	FOURTH QUARTER	PRE- PRIMARY	PRE P GENERAL	SUPPLEMENTAL	YEAR-END SUPPLEMENTAL
0400730W 00400000	GINNING DATE OF REPORTING PERIOD 2-22-09		8.b. ENDIN		ORTING PERIOD	
	ck one) This campaign is exempt from detaile tures total \$1,000 or less for this repo This campaign is required to file a detaind/or expenditures total more than \$	rting period. (Comp tailed financial discle	olete items 12 osure becaus	d., 12e. and 12	f.)	
a Fi	we do solemnly swear or affirm that the inccurate accounting of campaign contribution nancial Disclosure Act. Additionally, I/we enefit of the candidate or for any other non signature of candidate	ons and expenditure swear or affirm that	s required to no campaign	be reported by a contributions have federal intern	the candidate committee ave been expended for the	by the Campaign
11. W	ITNESS SIGNATURE Manual A. Vice signature of witness	4/1/09 date	-	sign	nature of witness	date
12. SU	MMARY				1230 1010	
a.	BALANCE ON HAND LAST REPORT				acanomic services and the services are services and the services and the services and the services are services and the services and the services are services and the services and the services are services are services and the services are services are services and the services are services are services are services are services are services are services and the services are services are services are services are services are services are se	
b. c.	TOTAL RECEIPTS THIS PERIOD TOTAL DISBURSEMENTS THIS PERIOD .				120475	
d.	BALANCE ON HAND (12.a. plus 12.b. m				MANAS	1843.41
e.	TOTAL LOANS OUTSTANDING					
f.	TOTAL OBLIGATIONS OUTSTANDING	NOISSI	MM03		(0.4)	
<i>A</i>		.00 NOT NOT 10 NOT 1	9373			



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SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD							
Manuel Kico	FROM: 2 22/59 TO: 3 31 09							
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)								
a. Unitemized Contributions (\$100 or less from each source this period)	\$ 200.00							
b. Itemized Contributions (over \$100 from each source this period)	\$ 1700.00							
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ 1900.00							
16. LOANS RECEIVED THIS REPORTING PERIOD	\$							
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$0-							
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ 1900.00							
DISBURSEMENTS								
19. EXPENDITURES (other than loan payments)								
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e	.g., printing, postage, gasoline)							
(Campaign Workers (2 workers) \$ 125 00	<u>) </u>							
toll Workers (8 Workers) \$ 150.0	<u>XX</u>							
Harland Check (Checks & deposit slips) \$ 19.25.								
Eastlake Senior Neighbors-donation \$ 100.00								
Cedar Hill Neighborhood Assoc Monation \$ 100.0	00							
Southside Neighborhood Association: 100.00								
<u>Kidgedale Association-donation & 1000</u>	00							
\$								
\$								
Total of Expenditures (\$100 or less each payee)	\$ 1194.25							
b. Itemized Expenditures (Over \$100 each payee this period)	\$ 200.00							
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ 1394.25							
20. LOAN REPAYMENTS MADE THIS PERIOD	\$0-							
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)								
22. IN-KIND CONTRIBUTIONS								
a. Unitemized in-kind contributions (\$100 or less from each source this period)\$								
b. Itemized in-kind contributions (over \$100 from each source this period)\$								
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)\$								
23. OBLIGATIONS								
a. Unitemized Obligations Outstanding (\$100 or less each)	\$							
b. Itemized Obligations Outstanding (Over \$100 each)	\$							
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i iten	n 12.f.)\$							



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ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	ING THE PERIOD			
Manuel Lico	TO: 33109			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	TIONS FROM PRECEDING PAG	E (enter \$0 if first itemized p	age)	Amount - O -
4. COMPLETE THE APPROPRIATE ITEMS FOR E	ACH ITEMIZED CONTRIBUTION (c	ontributions totaling more than \$	100 from any contributor	
First Name	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name	I 101.	☐ Primary Election ☐	General Election	
Address 2214 Jenkins	Bd.	Runoff (Local Election	s Only)	\$ 200.00
City Chattanoga	State Zip Code 3742	Date of Contribution		Aggregate This Election
Occupation				и
Employer		2/23/0	9	
First Name	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name	<u> </u>	Primary Election	General Election	
Address 109 Malcolm	Lane	Runoff (Local Election	ns Only)	\$150.00
City Signal Mountain Occupation	State Zip Code 37377	Date of Contribution		Aggregate This Election
Employer	-	2/22/	09	
First Name	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name		☐ Primary Election ☐	General Election	to providentation (result
Southeast Political Ac	tion Committee		-	
Address P.O. Box 787		Runoff (Local Election	is Only)	
				\$250.00
City Chatheronge Occupation	State Zip Code 37401	Date of Contribution		\$ 250.00 Aggregate This Election
Chathenocaa	State Zip Code	Date of Contribution		\$ 250.00 Aggregate This Election
Occupation Employer	IIU 3740	2/24/	09	
Occupation Employer First Name	State Zip Code 37401	2 24 Contribution Received For:		\$ 250.00 Aggregate This Election
Chattanoga Occupation Employer First Name Last Name/Organization Name Brood St. Fast Lube	IIU 3740	2 2 4 Contribution Received For:	General Election	
Chattanoga Occupation Employer First Name Last Name/Organization Name Brood St. tast Lube Address 3225 Broad St	Middle Name Car Wash	2 2 4 ☐ Contribution Received For: ☐ Primary Election ☐ ☐ Runoff (Local Election	General Election	
Chattanoga Occupation Employer First Name Last Name/Organization Name Brood St. Fast Lube	Middle Name	2 2 4 Contribution Received For:	General Election	Amount of Contribution
Chattanoga Occupation Employer First Name Last Name/Organization Name Brood St. tast Lube Address 3225 Broad St City Handage	Middle Name Car Wash	2 2 4 ☐ Contribution Received For: ☐ Primary Election ☐ ☐ Runoff (Local Election	General Election	Amount of Contribution
Chattanoga Occupation Employer First Name Last Name/Organization Name Broad St. Fast Lube Address 3225 Broad St. City Chattanoga Occupation	Middle Name Car Wash State Zip Code 37408 of this form are used.)	2 2 4 ☐ Contribution Received For: ☐ Primary Election ☐ ☐ Runoff (Local Election	General Election	Amount of Contribution

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ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVER FROM:2/22/09	TO: 3/31/09			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	IONS FROM PRECEDING PAG	E (enter \$0 if first itemized p	Amount \$800.00				
		contributions totaling more than \$100 from any contributor)					
First Name CO CLOS	Middle Name	Contribution Received For:		Amount of Contribution			
Last Name/Organization Name		☐ Primary Election ☐	General Election				
Address		Пр. ««	0.1.)				
1117 Apple WOO	d Cir	Runoff (Loca) Election	is Only)	\$ 250,00			
City Signal Mountain	State Zip Code	Date of Contribution		Aggregate This Election			
Occupation 9							
Employer		21-	1-0				
		425	109				
First Name Jack	Middle Name	Contribution Received For		Amount of Contribution			
Last Name/Organization Name		☐ Primary Election ☐	General Election				
Address 59 87 Old Du	Olao Rd.	Runoff (Local Election	ns Only)	\$250.00			
city Whitwell	State Zip Code	Date of Contribution		Aggregate This Election			
Occupation		e					
Employer		2/27	109				
		421	109				
First Name	Middle Name	Contribution Received For		Amount of Contribution			
Last Name/Organization Name		Contribution Received For		Amount of Contribution			
Last Name/Organization Name Independent Healthcare	Middle Name Properties, UC	Contribution Received For	General Election	Amount of Contribution			
Last Name/Organization Name Independent Healthcare Address P.C. Box 249		Contribution Received For Primary Election Runoff (Local Election	General Election	Amount of Contribution			
Last Name/Organization Name Independent Healthcare Address P.O. Box 249 City Georgetown		Contribution Received For	General Election	Amount of Contribution \$7200.00 Aggregate This Election			
Last Name/Organization Name Independent Healthcare Address P.O. Box 249 City Georgetown Occupation	2 Properties UC	Contribution Received For Primary Election Runoff (Local Election	General Election	\$200.00			
Last Name/Organization Name Independent Healthcare Address P.O. Box 249 City Georgetown	2 Properties UC	Contribution Received For Primary Election Runoff (Local Election	General Election	\$200.00			
Last Name/Organization Name Independent Healthcare Address P.O. Box 249 City Georgetown Occupation	State Zip Code TN 37334	Contribution Received For Primary Election Runoff (Local Election	General Election	\$200.00			
Last Name/Organization Name Independent Healthcare Address P.O. Box 249 City Georgetown Occupation Employer	Proporties UC State Zip Code TN 37334	Contribution Received For Primary Election Runoff (Local Election Date of Contribution	General Election	\$ 200.00 Aggregate This Election			
Last Name/Organization Name Independent Healthcare Address P.O. Box 249 City Georgetown Occupation Employer First Name J. Last Name/Organization Name Farrow	State Zip Code TN 31334	Contribution Received For Primary Election Runoff (Local Election Date of Contribution	General Election as Only) General Election	\$ 200.00 Aggregate This Election			
Last Name/Organization Name Independent Healthcare Address D. O. Box 249 City Georgetown Occupation Employer First Name J. Last Name/Organization Name Farrow Address 5747 Tallant City Collegedale	State Zip Code TN 31334	Contribution Received For Primary Election Runoff (Local Election Date of Contribution Contribution Received For:	General Election as Only) General Election	Aggregate This Election Amount of Contribution			
Last Name/Organization Name Independent Healthcare Address D. O. Box 249 City Georgetown Occupation Employer First Name J. Last Name/Organization Name Farrow Address 5747 Tallant City O	State Zip Code TN 37334 Middle Name + ranklin Rd. State Zip Code	Contribution Received For Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election	General Election as Only) General Election	\$200.00 Aggregate This Election Amount of Contribution			
Last Name/Organization Name Independent Healthcare Address P.O. Box 249 City Georgetown Occupation Employer First Name Last Name/Organization Name Last Name/Organization Name City Collegedale	State Zip Code TN 37334 Middle Name + ranklin Rd. State Zip Code	Contribution Received For Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election Date of Contribution	General Election as Only) General Election	\$200.00 Aggregate This Election Amount of Contribution			
Last Name/Organization Name Independent Healthcare Address P.C. Box 249 City Georgetown Occupation Employer First Name Last Name/Organization Name Last Name/Organization Name City Collegedale Occupation	State Zip Code TN 37334 Middle Name + ranklin Rd. State Zip Code	Contribution Received For Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election Date of Contribution	General Election as Only) General Election as Only)	\$200.00 Aggregate This Election Amount of Contribution			
Last Name/Organization Name Independent Healthcare Address D.C. Box 249 City Georgetown Occupation Employer First Name Last Name/Organization Name Farrow Address 5747 Tallant City Collegedale Occupation Employer	State Zip Code 37.3340 Middle Name + Can Klin State Zip Code 37.3433	Contribution Received For Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election Date of Contribution	General Election as Only) General Election as Only)	\$200.00 Aggregate This Election Amount of Contribution			

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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD FROM: 2/27/09 TO: 3/31/09					
	(enter \$0 if first itemized na		Amount					
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page) 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)								
First Name TYQCU Middle Name			Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name		***************************************						
Address 80 Fox Run C	ic N	1						
city Flintstone	intstone GA 30725			Campaian Work				
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name								
Address								
City	State	Zip Code						
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name								
Address	• • • • • • • • • • • • • • • • • • • •							
City	State Zip Code							
First Name Middle Name			Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name								
Address								
City State Zip Code								
First Name	e	Purpose of Expenditure	Amount of Expenditure					
Last Name/Business Name								
Address		1 and American						
City State Zip Code								
First Name Middle Name			Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name								
Address								
City	City State Zip Code							
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount mus					\$200.00			

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ITEMIZED STATEMENT OF LOANS - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE						2. REPORT COVERING THE PERIOD FROM: TO:				
Manuel 14:60 [2/27/ng 3/31/ng						3/31/09				
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)										
Complete the Following for the Source of										
			Outstanding Loan Balance Loans (Beginning of Period) Received			Loan Outstanding Loan Ba Payments (End of Period)				
Last Name/Organization Name										
					Loan Received For: Date of Loan Primary Election General Election					
City State Zip Code				y Election						
List All Endorsers or Guarantors for Above Lo.							olease attacl	h a page)		
First Name		Middle Name			First Name Middle Name			ne		
Last Name/Organization Name					Last Name/Org	ganization Name				
Address					Address		******			
City		State	Zip Co	ode	City State Zip Code				Zip Code	
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding					
First Name Middle Name					First Name Middle Name			ne		
Last Name/Organization Name					Last Name/Organization Name					
Address					Address					
City State Zip Co		Zip Co	de	City State Zip Code				Zip Code		
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding					
First Name Middle Name				First Name Middle Name				me		
Last Name/Organization Name					Last Name/Organization Name					
Address					Address					
City		State	Zip Co	de	City				State	Zip Code
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding					
First Name Middle Name					First Name Middle Name			ne		
Last Name/Organization Name					Last Name/Organization Name					
Address					Address					
City		State	Zip Co	de	City				State	Zip Code
Amount Guaranteed Outstanding					Amount Guarar	nteed Outstandin	g			
4. Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16. on summary page.)				Outstanding Lo	of Period)	Loans Received	Loan Payme	ents	tstanding Loan Balance (End of Period)	
(Total loan payments should also be shown in item 20. on summary page.) (Total outstanding loan balance should also be shown in item 12.e. on front page.)				\$323		Ø	9	\$	3235,70	
SS-1132 (Rev. 4/02)						Pag	je <u> </u>	of <u>Q</u> .		RDA 1159